## PRENEED FUNERAL CONTRACTS IRREVOCABLE DOCUMENTARY LETTER OF CREDIT MODEL FORM

(Bank Name and Address on Bank Letterhead)

	Applicant:	(Applicant Name) (Applicant Address)
	Beneficiary:	South Carolina Department of Consumer Affairs 3600 Forest Drive, Ste. 300 P.O. Box 5757 Columbia, SC 29250-5757
	Letter of Credit No.	
	Expiration Date:	
Dear Sir/Madam:		
failed to comply with the Preneed Funeral Concontracted for Preneed Funeral Contracts to cu opportunity for hearing. We are therefore entit of credit number	, bearing the claused accompanied by the follow addressed to the applicant, tracts, S.C. Code § 32-7-19 stomers as determined by teled to the sum of \$, Or	se "drawn under documentary letter of ing documents:  stating:(applicant's name) has of the seq. or has failed to provide the Administrator after notice and drawn under letter
2. Beneficiary's signed statement a has not replaced this letter of credit number financial responsibility acceptable to the Admi we are therefore entitled to the sum of \$"	with another within 45 days of	the expiration date of the credit, and
		•
(Signature of authorized bank officer)		
(Title)	•	